

## CENTRON SECURITY SERVICES

## **Daily Security Report**

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Client No. Client No. Client No.	lathe	D	w/	26						Location / 00		05	ise	50	5+		Date	/20	6/8	27	
Facility Detex Clock Weapon No.	Н	oister	Nights	liek	Aa	iscoat / /	<sup>F</sup>	lashlight		Other	245	to	, (S	ste	6	TI	All	les			
Officers: Fully explain all items marked "Yes" with time and all detail. For additional space use reverse	Officer—Day Shift (Name)  Officer—Day Shift (Name)  Officer—Day Shift (Name)  Officer  Office							of	Swing Shift (Name)  KOKOSZK,						Officer Grave Shift (Name)  OFC, COATCS  Shift						
side and attach incident reports.	Began		8 A	SAPM Er	nded	4	AMPH	1 .		Y AM€	<b>₽</b> Eno	ed 4	ر ۱۵	BAPM began		12 6	Melin	Ended	8	AWPM.	
Observations or actions taken	Yes	No	0 0		Explanation		America	Yes	No	, AIVE	_	planation	<u>دے ، ت</u>	Yes	No	100		Explanat		الله الموق	
Rounds or stations missed		V							i						V						
Unlocked doors, gates or windows		ν				•			-						1/						
Unlocked vaults or safes		V			_				1-						1						
Fire-smoke-or hazards		V							1		·				1						
Extinguishers missing or defective		V							L					•	1/						
2. Sprinkler system defective		V							V						1						
3. Fire doors or exits blocked		V							1_						1	<u>'</u>					
4. Rubbish accumulation		V			_				4				-								
5. Motors running		V							V						V						
6. Lights left burning		~							1/						V						
Injury hazards		V							1 -						V						
Visitors		L							1						'	CAP	T C1	4055	-001	25	
Trespassing		V							~	*					1				•		
Violation of company rules		~							L						V						
Remarks															" -						
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														-							
IMPORTANT: If you were ill or injured please explain on the reverse side of this form and call your supervisor before leaving this post.																					
1. Were you injured during this tour?			Day Shift Yes	1.		2. No	Yes	No	3. Swing Yes	Shift No	1. Yes	No 2	Yes	- 1	rave Shift es	@ '	Yes	No	2. Yes	3. No	
2. Did you suffer any illness?			Yes (	<b>(3)</b>	Yes A	¥o	Yes	No	Yes	<u> </u>	Yes	No	Yes	No Y	_		Yes	No	Yes	No	
3. Have you reported all accidents coming to your attention?				No	Yes N	₩o	Yes	No	(PES)	No	Yes	No	Yes				Yes	No	<u>Y</u> es	No	
Chulf 12-12.	7 s	ignatures	Day Shift 1	Ne.	met	el.	Fla	Q'Z	Swing.	Similar	, D	- le	7		rawy Shift	per	•	R/	Deri G		
//	s	ignatures	2.					/	2		~ / _		-	2.		Ø		, , .			
	Signatures 3.								3		3.	3 438765									